GM Section	Changes	Date	Staff
Introduction	page 1, Minor language changes	4/3/2012	LKS
Section 2.4	Page 8, Medical Home-Inserted website for American Academy of Pediatrics, www.miaap.org; removed reference to appendix A as this is not listed	4/3/2012	LKS
Section 4.1-C	pages 14-15, Quality and Program Services, Inserted New sub-title and placed Children with Special Needs (CSN) Fund under Quality and Program Services	4/3/2012	LKS
Section 5.2	page 18, Program Services and Support, Added URL for the Family Guide and	2/21/2012	LKS
Section 6.1-A - Role of LHD	pages 24-25, Instructions listed in steps; added link to Appendix A contact information for Language Line website	2/21/2012	LKS
Section 6.1-B	page 25, MIHealth Training-Direct link added to section for this training	2/21/2012	LKS
Section 6.1-C, Local Liaison Report	page 25, End of last sentence incorporated URL for MITrain access	2/21/2012	LKS
Section 8.1 - Medical Eligibility	Added: initial medical eligibility is applicable for one year from the MDCH medical consultant determination date	8/22/2012	LKS
Section 9.1 general information	Added: within one year of medical eligibility determination date	8/2/2012	LKS
Section 9.1 - Application Process	Inserted 'or person(s) with power of attorney'	7/27/2012	LKS
Section 9.5 - payment agreement	page 45, In third paragraph, inserted the missing verbage of "by the responsible party" from policy	3/22/2012	LKS
Section 9.6 chronological summary of appl process	revised three bullets to include this language: a copy of the medical report is sent to the LHD	8/2/2012	LKS
Section 9.6 chronological summary of appl	Changed title of Appendix L to read as: Consultant Reason Codes	8/22/2012	LKS
Section 10.2 - Coverage Periods	Identified MIChild/Healthy Kids as subsection 10.2-A and new policy on Health Insurance Program (HIP) as new subsection 10.2-B as per MSA bulletin 12-20	8/22/2012	LKS
Section 10.2 - Coverage Periods	Revision to example listing 'the client has turned age 18 by' instead of 'will turn age 19 by' the time the IRPA is submitted to CSHCS	8/22/2012	LKS
Section 12 - Medical Services Coverage	page 68, Added radiological procedures as own bullet	3/22/2012	LKS

Section 12.7 Telemedicine	page 72, Added telemedicine policy at end of section 12	7/27/2012	LKS
Section 13 - Care Coordination	page 75, Inserted all policy language that did not get included in GM	4/5/2012	LKS
Section 13	pages 75-80, Removed "bolded" language as it is guidance information and not policy	4/5/2012	LKS
Section 14 - Case Management	page 82, Inserted policy language at beginning of section; all previously bolded information was unbolded	4/5/2012	LKS
Section 14	page 82, Incorporated Note identifying where language came from (MDPH still identified in Title XIX-state plan)	3/27/2012	LKS
Section 19.2 - Medicare Part B Buy-In	page 109, Referenced completion of MSA-0725 as described above in this section; removed Application for Insurance Premium Payment	3/28/2012	LKS
Section 20 - Out-of- State Medical Care	page 112, Included additional policy language	3/28/2012	LKS
Section 20	page 112, Replaced all bullets under non-emergency medical care	3/28/2012	LKS
Section 20.2- Provider enrollment	page 113, Revised policy language to most current policy language	3/28/2012	LKS
Section 21 - Travel Assistance	page 116, Inserted most current policy language	3/30/2012	LKS
Section 21	page 116, Added additional language to explain travel assistance; added clarification at end of paragraph to have LHDs call MDCH transportation analyst for approval	3/30/2012	LKS
Section 21	pages 116-118, Added additional guidance for LHDs to clarify in-state travel; Underlined heading for new part of section 21; then inserted seven steps	3/30/2012	LKS
Section 21.1; Instate travel	page 118, Inserted additional resource: "or by calling the CSHCS Family Phone Line"; inserted information on assistance available to client's PCP when visit is for pre-surgical or pre-operative exam required for qualifying condition prior to surgery; another clarification added regarding PT/OT/Speech therapy and travel assistance availability when it is for the qualifying diagnosis and ordered by an authorized provider	3/28/2012	LKS
Section 21.1	page 119, Inserted language of where the BAM 825 can be located on the web	3/30/2012	LKS
Section 21.2	page 119, Moved MTM here and renumbered everything else below	3/30/2012	LKS

Section 21.2-A; Process for authorization of transportation through (MTM) contractor	page 121, For item #5 inserted the toll free number for the MTM and removed (see directory for contact info)	3/30/2012	LKS
Section 21.2-A	page 121, Inserted actual log name with quotations and directed LHD to see attached at end of section; also requested copies of logs to be submitted to transportation analyst on quarterly basis	3/30/2012	LKS
Section 21.3; Out of state travel	last paragraph of section, page 124, Unbolded "for expenses affiliated with approved travel" as not written in policy, and included with the exception of air fare and car rentals; included additional policy language in several areas of	3/30/2012	LKS
Section 21.5	page 125, Added to first sentence to clarify who completes section 1 of the travel form; LHD or us; Added to first part of second sentence to include "LHD	3/30/2012	LKS
Section 21.5; Travel reimbursement process	last paragraph on page 125, inserted language for clarification	3/30/2012	LKS
Section 21.5	page 125, Last paragraph-Inserted "travel" and "following the month authorized" to clarify policy language	3/30/2012	LKS
Section 21.6; Travel advances and reconciliation	page 126, Second paragraph-Inserted transportation analyst and removed "quality and program services section"	3/30/2012	LKS
Section 21.6	page 126, Second paragraph-Removed "usually within one week of the request" and inserted "please allow at least two week for full processing."	3/30/2012	LKS
Section 21.6	page 126, 3rd paragraph, inserted "original" in front of receipts and underlined for emphasis	3/30/2012	LKS
Section 21.7; Non- emergency medical transportation	page 127, Removed family calling the provider directly	3/30/2012	LKS
Section 21.7	page 127, Under section 2 inserted "for this section" at end of sentence	3/28/2012	LKS
Section 21.10; Emergency transportation coverage	page 129, Changed information within parenthese to identify it is the Medical Provider Manual that people need to see for this information and not the MDCH guidance manual	3/30/2012	LKS
Section 21.11	page 129, added new section: Non-medical transportation	3/30/2012	LKS
Section 21.12	page 129, added new section: Inappropriate use of transportation benefits	3/30/2012	

Section 22.1	page 133, Inserted policy language to match current policy and inserted	3/28/2012	LKS
CHAMPS on-line provider	clarification of where to find information within the Medicaid Provider Manual		
Section 22.3-B, Hospitals	page 134, Changed information in first bullet to reflect new name (no longer JCAHO, now the Joint Commission or TJC)	3/29/2012	LKS
Section 22.5, verifying provider authorization and diagnosis information	page 136, New guidance inserted regarding NPI number at end of section and updated last sentence in section regarding location of information and which manual it is coming from	3/29/2012	LKS
Section 22.7-A, Eligibility verification system (EVS)	page 137, Unbolded information within bullets as not in policy; Added information from Medicaid Provider Manual explaining CSHCS guidelines, including where to find this information in the MPM	3/29/2012	LKS
Section 22.10	pages 140-143, LHD Guide to Problem Solving for Families Prior to Sending to Lansing Office-All updated information inserted-LHD guide to problem solving for families prior to sending to lansing office	4/20/2012	LKS
Section 24.8, Summer camp scholarship program	page 156, Inserted new language before second sentence "any year it has been determined CSN has funding"	4/9/2012	LKS
Updated Appendix L	Appendix L now has a new title: Consultant Reason Codes	8/2/2012	LKS
Updated Appendix I	Appendix I revised to show list of diagnosis related specialty providers in alphabetical order	8/2/2012	LKS